

**NEIGHBORHOOD DEVELOPMENT FUND**  
**Not-for-Profit Request**

DATE: May 22, 2006

TO: Appropriations Committee

FROM: Council Member Jim King

RE: Request for Neighborhood Development Fund to be considered by the Appropriations Committee.

I have reviewed the attached Proposal in the amount of \$1200.00 through the District 10 NDF for Schnitzelburg Area Community Council, International Dainty Contest and have found it complete and within our guidelines. I/We have read the organization's statement of public purpose to be furthered by the funds requested and I/We agree that the public purpose is legitimate. I/We have also completed the disclosure section below.

Please add this Grant Proposal Agreement to the agenda of the next Appropriations Committee Meeting.

  
\_\_\_\_\_  
Signature of Council Member

\_\_\_\_\_  
Signature of Council Member

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Signature of Council Member

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Signature of Council Member

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Signature of Council Member

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Signature of Council Member

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Signature of Council Member

\_\_\_\_\_  
Signature of Council Member

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**DISCLOSURE**

List below any relation you have with the organization requesting the grant (your, your family, your legislative assistant or any city employee to this organization and to any member of the organization's board of directors or their employees.)

\_\_\_\_\_  
  
\_\_\_\_\_

Approved by:

\_\_\_\_\_  
Appropriations Committee Chairman

\_\_\_\_\_  
Date



**SECTION ONE:**  
**DESCRIPTION OF APPLICANT AGENCY/ORGANIZATION**

**IDENTIFYING INFORMATION**

- I. Official Name of Agency/Organization (Agency) as listed with the Kentucky Secretary of State:  
Schnitzelburg Area Community Council
- II. Organization number as listed with the Kentucky Secretary of State: \_\_\_\_\_
- III. List any "working" or "does business as" names for organization:  
Gary Wayne Allen
- IV. Address of main office: (street and zip + 4)  
1050 Wagner St
- V. P. O. / mailing address if different: \_\_\_\_\_ (zip + 4) 0217
- VI. Phone # (502) 634-9130 Fax# (502) 634-9130
- VII. E-Mail BoomBoomKy@aol.com
- VIII. Agency's Legal Signatory/Title  
Name Gary W. Allen  
Title President
- IX. Contact person responsible for application:  
A. Name: Gary Allen  
B. Phone # (502) 634 9130 Fax# (502) Same  
C. E-Mail BoomBoomKy@aol.com

**DESCRIPTION OF AGENCY**

- I. Describe your Agency's vision, mission and services:

To bring neighborhood people together, to strengthen our  
neighborhood so to come together - To gain support from  
people of Schnitzelburg, Devontown, Mountair, Shelby Park,  
and Mount Louisville

- II. Total number of Board members \_\_\_\_\_
- III. Number of Board meetings held to date in current fiscal year 11
- IV. Average attendance at Board meetings \_\_\_\_\_

**FACILITIES**

- I. List location(s) and terms (owned, rented, leased, or donated).
- A. Zion United Church of Christ
- B. St. Elizabeth Church
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- II. Are all facilities handicapped accessible? Yes ☒ No \_\_\_\_\_
- III. If no, please explain:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**FINANCIAL INFORMATION**

- I. Agency's fiscal year from (month) Jan to (month) Dec
- II. Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? No ☒ Yes \_\_\_\_\_
- III. If yes, please explain.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- IV. For the current fiscal year, list funds received from Louisville Metro Government, including funds from any department, office, etc. in either the former City of Louisville or Jefferson County.
- \$ \_\_\_\_\_ Source: \_\_\_\_\_
- \$ \_\_\_\_\_ Source: \_\_\_\_\_
- \$ \_\_\_\_\_ Source: \_\_\_\_\_

\$ \_\_\_\_\_ Source: \_\_\_\_\_

V. Provide one copy only of each of the following, as appropriate (4 points):

- A. Articles of Incorporation.
- B. Approved budget or executive summary for your Agency's current fiscal year.
- C. Proof of IRS 501(C) (3) status, or application for this IRS status, if applicable.
- D. Staffing structure for entire Agency, including organizational chart.
- E. Board member list; specify chair, vice-chair, secretary, and treasurer.
- F. If your Agency is an employer required to have a written Affirmative Action/Equal Employment Opportunity policy: copy of policy.
- G. If rent/occupancy costs are being requested: copy of the signed lease.
- H. If program participants have the opportunity to evaluate the services received: one copy each of any forms used.

VI. List below any relationship any members of your Board of Directors or employees have with any Metro Council Member, Council Member's family, Council Member's staff, or any Louisville Metro Government employee.

None

VII. I certify under the penalty of law that the information in this application is accurate to the best of my knowledge. I am aware that my Agency will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am authorized to sign this application for the Agency.

Name of Legal Signatory: (type or print) Larysfaye Allen

Title: President Schretzelburg Area Community Council

Signature Larysfaye Allen

Date   /  /

LOUISVILLE METRO COUNCIL  
APPLICATION FORM FOR  
NEIGHBORHOOD DEVELOPMENT FUNDS  
(2005-2006)

Proposed Activity/Need: 36<sup>th</sup> Annual Nanty Contest  
Name of Applicant Agency: Schitzelburg Area Community Council  
AMOUNT OF FUNDING REQUESTED \$1200.00

I. Contact Person responsible for the Activity described in this proposal:

A. Name Doug Allen  
B. Title President  
C. Phone # (502) 634-9130 Fax # (502) 634-9130  
D. E-mail Born Born Ky @ Dot Com

2. If funded, this activity will further which of the major goals of Louisville Metro listed below.

- ☒ Bringing Us Together  
☐ Keeping Us Safe  
☐ Promoting Education and Growing Jobs  
☒ Enhancing Neighborhoods and Protecting Our "Louisville" Quality of Life

3. If funded, this activity will strengthen (check one):

- ☐ Youth (teenagers, ages 13-19)  
☐ Human Services (Citizens with barriers to meeting basic human needs)  
☐ Arts/cultural  
☒ Neighborhoods  
☐ Business Associations  
☐ Parks  
☒ Community Activities and Events  
☐ Other: if you do not believe your proposal fits any of the above, please describe the nature of your request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If approved, Louisville Metro Funds will be used for (check one)

- ☒ Operating Funds (cannot exceed 33% of agency's total budget)  
☐ Programming/services/events for direct benefit to community or qualified individuals  
☐ Capital equipment (small operating equipment which may be used to benefit the individuals or community being served. (No building or renovations)

5. PROPOSAL DESCRIPTION: Describe how you are going to further one of the four

major goals of Louisville Metro Government by this proposal. (See #2)

To bring neighborhood residents together celebrate  
historical traditions & historical neighborhood traditions. 36 yrs  
strong.

6. Describe the activity being proposed to address the goal.

The Wainy Contest. Family fun, fun, educational.

7. Describe how the funding is to be used. BE SPECIFIC.

Security, safety equipment, volunteer needs, Band, banner  
and for Wainy goods, promotional items. - Put a lot's.

8. Describe the results/goals for this proposal. How will you know it is successful?

To educate young generation, and encourage people that  
attend. 500+

EXPECTATIONS/REQUIREMENTS INCLUDE BUT ARE NOT LIMITED TO:

- a. Participate in post-award training.
- b. Make all program and financial records available to any monitors from Louisville Metro to assure compliance with the approved funding.
- c. Failure to provide the services, programs or projects included in the agreement will result in funds being withheld, or in requirement for reimbursing Louisville Metro.
- d. Return to Louisville Metro of any unexpended funds by July 31, 2006.
- e. Documentation of all expenditures (canceled checks, receipts, paid invoices )

COMPLETE PAGE 3 -BUDGET SUMMARY STATEMENT FOR THIS PROJECT.

STAFF ONLY:

\_\_\_\_\_ Description of Applicant Agency/Organization Complete

_____ All documentation is attached: 501(c)3 status, Articles of Incorporation,
Secretary of State status, EIN (Employer Identification Number)

**PROJECT/PROGRAM BUDGET SUMMARY STATEMENT**

**AGENCY NAME:** \_\_\_\_\_

**Project/Program Name:** \_\_\_\_\_

This Project/Program Proposal is #\_\_\_\_\_ of \_\_\_\_\_



REVENUES ANTICIPATED	2005-2006	% of Total Revenue
	Round to the nearest \$100	
Louisville Metro Government Requested of Metro Agency: Metro Council	\$ 1200 —	
State of Kentucky		
Federal Government (Including Federal Pass-thru to State)		
United Way		
Fees for Services		
Private Contributions		
Interest Income		
Other Sources (Please specify)		
<b>TOTAL REVENUES</b>	<b>\$</b>	<b>100%</b>

OPERATING EXPENSES		
Personnel (including all fringes)		
Operating (Contractual and Supplies)		
Capital Equipment (Small Operating Equipment)		
<i>Security Co. - Security - Band - fronting</i> <i>Johnson</i>		
<b>TOTAL EXPENDITURES</b>	<b>\$ 1200 —</b>	<b>100%</b>

Value of in-kind assets, such as donated space, supplies, use of equipment, etc.	\$
Value of volunteer services and how computed:	\$



REPUBLIC BANK & TRUST COMPANY  
 1420 POPLAR LEVEL RD  
 LOUISVILLE KY 40217  
 PHONE: (502) 636-2661

\*\*\*\*\*AUTO\*\*3-DIGIT 402  
 7805 0.8190 AT 0.308 46 1 19

SCHNITZELBURG AREA COMMUNITY COUNCIL  
 1343 HICKORY ST  
 LOUISVILLE KY 40217-1262

Account #54-300-703  
 Statement Date 04/30/06

Page 1

YOUR ACCOUNTS AT A GLANCE	
checking Balance	\$ 3,665.05

### ACCOUNT STATEMENT

SUPPORT USA CARES BY PURCHASING AN "I CARE TOO" SHIRT  
 FOR \$2 AT ANY BANKING CENTER. USA CARES ASSISTS  
 MILITARY PERSONNEL AND THEIR FAMILIES AROUND THE WORLD.

#### FREE BUSINESS CHECKING

Account #54-300-703

Beginning balance on 03/31/06	\$	3,884.41
+ Deposits and other credits (2)	\$	282.00
+ Interest Paid	\$	0.00
- Checks and other debits (2)	\$	501.36
- Service Charges	\$	0.00
Ending balance on 04/30/06	\$	3,665.05

#### CHECKS & OTHER DEBITS

(\* Indicates break in check sequence)

Check#	Date	Amount	Check#	Date	Amount	Check#	Date	Amount
1066	04/03	60.00	1067	04/05	441.36			

#### DEPOSITS & OTHER CREDITS

Date	Description	Amount
04/26	DEPOSIT	264.00
04/26	CREDIT MEMO	18.00

#### DAILY BALANCE SUMMARY

Date	Balance	Date	Balance	Date	Balance
03/31	3,884.41	04/05	3,383.05		
04/03	3,824.41	04/26	3,665.05		

ZEUS 3270 Emulator: Base3270CommSession

IMI3 05/24/06 DDA STATEMENT INQUIRY 12.39.49 PAGE 1  
SCHNITZELBURG AREA COMMUNITY COUNCIL ACCOUNT 015-000-0000-0054300703  
1343 HICKORY ST DATE THIS STATEMENT 05/24/06  
LOUISVILLE KY 40217 DATE LAST STATEMENT 04/30/06

## \*\*\*\*\*DDA TRANSACTIONS\*\*\*\*\*

BALANCE	CHECKS/OTHER DEBITS	DEPOSITS/OTHER CREDITS	BALANCE
LAST STATEMENT	NBR	TOTAL AMOUNT	THIS STATEMENT
3665.05	1	47.32	3637.73

DATE	CK	NBR	AMOUNT	TY	TRANSACTION DESCRIPTION	BALANCE
05/15			20.00		DDA DEPOSIT	3685.05
05/22		1069	47.32		DDA CHECK	3637.73

Jul 21 05 10:40p

Gary Allen

5026349130

P.3

JUL-22-2005 FRI 09:18 AM TELEBANKING

FAX NO. 502 561 7155

P. 02

Command ==&gt; IMI1

Page 01 of 02 07/22/05

09:19:15

## ACCOUNT INFORMATION

Account 0054300703 Ctl2 015 Ctl3 000 Ctl4 0000 Ctl1 03 Curr

Prod Type 159 FREE BUSINESS CHECKING  
Status 00-NORMAL  
SEHNITZELBURG AREA COMMUNITY COUNCIL  
1543 HICKORY ST  
LOUISVILLE KY 40217

## MSGs:

System Type 010-COMMERCIAL

Ext Inv Fund	Link
Cust Balance	1573.97
Memo Balance	1573.97
DDA Balance	1573.97
Loan Balance	0.00
Sav Balance	0.00
Total Holds	0.00
Bank Unavail	0.00
Cust Unavail	0.00
Min DDA Bal	1579.01
Avg Coll Bal	1579.01
MTD Avg Bal	11.00
Last Dep Amt	0.00
Chrg Off Amt	0.00
External Inv	0.000000
Cyc Accrd	0.00
Proj Accrd	PF9-RBIA

MMFA NO ODH	Dt Opened	05/11/04
Charge Card? NO	Dt Lst Cust Actv	07/06/05
Spec Inst? NO	Dt Lst Dep	06/15/05
NEB? NO OD? NO	Dt Lst Maint	05/12/04
Bal Hist? NO	Sign 0 Loc Nbr	
Bal Hist Ret 0	TIN: Cd 1 Nbr	320111959
Cnt Kite Days 0	Number Amt Xfers	0
MM Kite Days 0	Number Ck Items	2
Slcp Pay 0	OD Limit	999999999999.99

PF1-Fwd PF4-Hist PF5-Redis PF14-S/H Inq PF12-Help PF6-IMQ1

01,15

Jul 21 05 10:40p

Gary Allen

5026349130

P.2

JUL-22-2005 FRI 09:18 AM TELEBANKING

FAX NO. 502 561 7155

P. 03

07/22/05

DDA STATEMENT INQUIRY

09.18.57 PAGE 1

SCHMITZELBURG AREA COMMUNITY COUNCIL

ACCOUNT 015-000-0000-0054300703

1043 HICKORY ST

DATE THIS STATEMENT 07/22/05

LOUISVILLE KY

40217

DATE LAST STATEMENT 06/30/05

\*\*\*\*\*DDA TRANSACTIONS\*\*\*\*\*

BALANCE  
LAST STATEMENT  
1832.66

CHECKS/OTHER DEBITS	DEPOSITS/OTHER CREDITS
NBR	TOTAL AMOUNT
2	258.69
	0
	0.00

BALANCE  
THIS STATEMENT  
1573.97

DATE	CK	NBR
6/21/05		1036
6/27/05		1037

AMOUNT	TY	TRANSACTION DESCRIPTION
237.50		DDA CHECK
21.19		DDA CHECK

BALANCE  
1595.16  
1573.97

01,02

SACC  
Income and Expenses - Actual vs. Prior Period  
For All Accounts

	1/1/04- 12/31/04 ACTUAL	1/1/04- 12/31/04 ACTUAL	DOLLAR CHANGE
<b>INCOME</b>			
Income			
DAINTY CONTEST INCOME	\$ 2,000.00	\$ 2,000.00	\$ 0.00
DUES RECEIVED	705.00	705.00	0.00
FAMILY PICNIC INCOME	337.75	337.75	0.00
HAUCK PLAQUE DONATIONS	1,366.71	1,366.71	0.00
INTEREST INCOME	22.23	22.23	0.00
SALE OF MUGS	70.00	70.00	0.00
YARD SALES INCOME	740.00	740.00	0.00
Total Income	\$ 5,241.69	\$ 5,241.69	\$ 0.00
TOTAL INCOME	\$ 5,241.69	\$ 5,241.69	\$ 0.00
<b>EXPENSE</b>			
Expense			
BANK CHARGES	\$ 84.50	\$ 84.50	\$ 0.00
CORPRATION LICENSE FEE	61.00	61.00	0.00
DAINTY CONTEST EXPENSE	1,552.63	1,552.63	0.00
DONATION	167.40	167.40	0.00
FAMILY PICNIC EXPENSE	543.10	543.10	0.00
GEORGE HAUCK EXPENSE	1,700.00	1,700.00	0.00
INVESTMENT FEE	75.00	75.00	0.00
OFFICE EXPENSE	246.48	246.48	0.00
PRINTING EXPENSE	357.54	357.54	0.00
TRANSFERS	0.00	0.00	0.00
Total Expense	\$ 4,787.65	\$ 4,787.65	\$ 0.00
TOTAL EXPENSE	\$ 4,787.65	\$ 4,787.65	\$ 0.00
NET INCOME (LOSS)	\$ 454.04	\$ 454.04	\$ 0.00

SACC  
Income and Expenses - Actual vs. Prior Period  
For All Accounts

	1/1/05- 7/31/05 ACTUAL	1/1/05- 7/31/05 ACTUAL	DOLLAR CHANGE
<b>INCOME</b>			
Income			
DAINTY CONTEST INCOME	\$ 0.00	\$ 0.00	\$ 0.00
DONATION INCOME	25.00	25.00	0.00
DUES RECEIVED	696.00	696.00	0.00
FAMILY PICNIC INCOME	21.00	21.00	0.00
HAUCK PLAQUE DONATIONS	600.00	600.00	0.00
INTEREST INCOME	12.95	12.95	0.00
NEIGHBORHOOD PICNIC	0.00	0.00	0.00
SALE OF MUGS	0.00	0.00	0.00
YARD SALES INCOME	0.00	0.00	0.00
<b>Total Income</b>	<b>\$ 1,354.95</b>	<b>\$ 1,354.95</b>	<b>\$ 0.00</b>
<b>TOTAL INCOME</b>	<b>\$ 1,354.95</b>	<b>\$ 1,354.95</b>	<b>\$ 0.00</b>
<b>EXPENSE</b>			
Expense			
BANK CHARGES	\$ 0.00	\$ 0.00	\$ 0.00
CORPORATION LICENSE FEE	4.00	4.00	0.00
CORPRATION LICENSE FEE	0.00	0.00	0.00
DAINTY CONTEST EXPENSE	25.00	25.00	0.00
DONATION	220.00	220.00	0.00
FAMILY PICNIC EXPENSE	150.62	150.62	0.00
GEORGE HAUCK EXPENSE	0.00	0.00	0.00
IN MEMORY OF	84.80	84.80	0.00
INVESTMENT FEE	0.00	0.00	0.00
MONTHLY DRAW	5.00	5.00	0.00
MONTHLY MEETING EXPEN...	47.92	47.92	0.00
OFFICE EXPENSE	0.00	0.00	0.00
POSTAGE	99.90	99.90	0.00
PRINTING EXPENSE	256.24	256.24	0.00
SEMINARS	0.00	0.00	0.00
TRANSFERS	0.00	0.00	0.00
<b>Total Expense</b>	<b>\$ 893.48</b>	<b>\$ 893.48</b>	<b>\$ 0.00</b>
<b>TOTAL EXPENSE</b>	<b>\$ 893.48</b>	<b>\$ 893.48</b>	<b>\$ 0.00</b>
<b>NET INCOME (LOSS)</b>	<b>\$ 461.47</b>	<b>\$ 461.47</b>	<b>\$ 0.00</b>

SACC  
Balance Sheet - Actual vs. Prior Period  
For All Accounts

	12/31/04 ACTUAL	12/31/04 ACTUAL	DOLLAR CHANGE
<b>ASSETS</b>			
Checking			
P. N. C.	\$ 0.00	\$ 0.00	\$ 0.00
REPUBLIC BANK	1,322.16	1,322.16	0.00
Total Checking	\$ 1,322.16	\$ 1,322.16	\$ 0.00
Savings			
HILLIARD LYONS	\$ 4,091.98	\$ 4,091.98	\$ 0.00
Total Savings	\$ 4,091.98	\$ 4,091.98	\$ 0.00
<b>TOTAL ASSETS</b>	<u>\$ 5,414.14</u>	<u>\$ 5,414.14</u>	<u>\$ 0.00</u>
<b>LIABILITIES</b>			
<b>TOTAL LIABILITIES</b>	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
<b>EQUITY</b>			
General Fund	5,414.14	5,414.14	0.00
<b>TOTAL EQUITIES</b>	<u>\$ 5,414.14</u>	<u>\$ 5,414.14</u>	<u>\$ 0.00</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u>\$ 5,414.14</u>	<u>\$ 5,414.14</u>	<u>\$ 0.00</u>

SACC  
Balance Sheet - Actual vs. Prior Period  
For All Accounts

	7/31/05 ACTUAL	7/31/05 ACTUAL	DOLLAR CHANGE
<b>ASSETS</b>			
Checking	\$ 0.00	\$ 0.00	\$ 0.00
P. N. C.	1,875.61	1,875.61	0.00
REPUBLIC BANK			
Total Checking	\$ 1,875.61	\$ 1,875.61	\$ 0.00
Savings	\$ 0.00	\$ 0.00	\$ 0.00
HILLIARD LYONS	4,000.00	4,000.00	0.00
REPUBLIC C/D.			
Total Savings	\$ 4,000.00	\$ 4,000.00	\$ 0.00
<b>TOTAL ASSETS</b>	<u>\$ 5,875.61</u>	<u>\$ 5,875.61</u>	<u>\$ 0.00</u>
<b>LIABILITIES</b>			
<b>TOTAL LIABILITIES</b>	\$ 0.00	\$ 0.00	\$ 0.00
<b>EQUITY</b>			
General Fund	5,875.61	5,875.61	0.00
<b>TOTAL EQUITIES</b>	<u>\$ 5,875.61</u>	<u>\$ 5,875.61</u>	<u>\$ 0.00</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u>\$ 5,875.61</u>	<u>\$ 5,875.61</u>	<u>\$ 0.00</u>

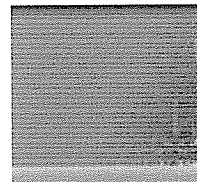




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<b>Organization Number</b>	0078158
<b>Name</b>	THE SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	2/7/1977
<b>Organization Date</b>	2/7/1977
<b>Last Annual Report</b>	3/27/2006
<b>Principal Office</b>	1343 HICKORY STREET LOUISVILLE, KY 40217
<b>Registered Agent</b>	WILLIAM W. TINKER, JR. 1343 HICKORY LOUISVILLE, KY 40217

**Current Officers**

<b>President</b>	Gary Allen
<b>Vice President</b>	Ben Snyder
<b>Secretary</b>	Bannah Beaty Armstrong

<b>Treasurer</b>	William W. Tinker
<b>Director</b>	Gary Allen
<b>Director</b>	Ben Snyder
<b>Director</b>	William W. Tinker
<b>Director</b>	Bannah Beaty Armstrong

**Incorporators and Initial Directors**

<b>Director</b>	WILLIAM KEELY
<b>Incorporator</b>	WILLIAM KEELY
<b>Director</b>	GREGORY SARJENT
<b>Incorporator</b>	JAMES PEAK
<b>Director</b>	JAMES PEAK
<b>Incorporator</b>	WILLIAM TINKER
<b>Director</b>	WILLIAM TINKER
<b>Incorporator</b>	GREGORY SARJENT

**This organization has no assumed names****Images Available Online**

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

3/27/2006	1 page	tiff	PDF	Annual Report
11/9/2005	1 page	tiff	PDF	Articles of Amendment
3/18/2005	1 page	tiff	PDF	Annual Report
10/7/2004	3 pages	tiff	PDF	Reinstatement
10/7/2004	1 page	tiff	PDF	Statement of Change

**Certificates Available**

[Certificate of Existence](#)

[Certificate of Existence \(Reinst\)](#)

[Certificate of Registered Agent \(Domestic and Foreign\)](#)

Click on a certificate title to purchase it. Certificates are \$10.00, payable by credit card or prepaid account. They are stored and returned as PDF documents. You must have Adobe PDF Reader to print the document.

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SACC  
Balance Sheet - Actual vs. Budget  
For All Accounts

	11/30/04 ACTUAL	11/30/04 BUDGET	DOLLAR CHANGE
ASSETS			
Checking	\$ 0.00	\$ 0.00	\$ 0.00
P. N. C. REPUBLIC BANK	1,296.30	0.00	1,296.30
Total Checking	\$ 1,296.30	\$ 0.00	\$ 1,296.30
Savings			
HILLIARD LYONS	\$ 4,081.55	\$ 0.00	\$ 4,081.55
Total Savings	\$ 4,081.55	\$ 0.00	\$ 4,081.55
TOTAL ASSETS	\$ 5,377.85	\$ 0.00	\$ 5,377.85
LIABILITIES			
TOTAL LIABILITIES	\$ 0.00	\$ 0.00	\$ 0.00
EQUITY			
General Fund	5,377.85	0.00	5,377.85
TOTAL EQUITIES	\$ 5,377.85	\$ 0.00	\$ 5,377.85
TOTAL LIABILITIES & EQUITY	\$ 5,377.85	\$ 0.00	\$ 5,377.85

SACC  
Income and Expenses - Actual  
For All Accounts  
January 01 through November 30, 2004

	1/1- 1/31	2/1- 2/29	3/1- 3/31	4/1- 4/30	5/1- 5/31	6/1- 6/30	7/1- 7/31	8/1- 8/31	9/1- 9/30	10/1- 10/31	11/1- 11/30
<b>INCOME</b>											
Income											
DAINTY CONTEST INC...	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 2,000	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
DUES RECEIVED	98	48	47	163	73	0	0	18	10	62	92
FAMILY PICNIC INCOME	0	0	0	0	0	100	170	68	0	0	0
HAUCK PLAQUE DONA...	0	0	0	0	1,267	0	0	100	0	0	0
INTEREST INCOME	2	0	0	0	0	5	0	0	0	0	5
SALE OF MUGS	70	0	0	0	0	0	0	0	0	0	0
YARD SALES INCOME	0	0	0	0	0	0	0	65	675	0	0
	<u>\$ 170</u>	<u>\$ 48</u>	<u>\$ 47</u>	<u>\$ 163</u>	<u>\$ 1,340</u>	<u>\$ 2,105</u>	<u>\$ 170</u>	<u>\$ 251</u>	<u>\$ 685</u>	<u>\$ 62</u>	<u>\$ 97</u>
otal Income	\$ 170	\$ 48	\$ 47	\$ 163	\$ 1,340	\$ 2,105	\$ 170	\$ 251	\$ 685	\$ 62	\$ 97
TOTAL INCOME	\$ 170	\$ 48	\$ 47	\$ 163	\$ 1,340	\$ 2,105	\$ 170	\$ 251	\$ 685	\$ 62	\$ 97
<b>EXPENSE</b>											
xpense											
BANK CHARGES	\$ 0	\$ 0	\$ 0	\$ 0	\$ 53	\$ 31	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
CORPRATION LICENSE...	0	0	0	0	0	0	0	0	0	61	0
DAINTY CONTEST EXP...	0	0	0	0	0	0	283	263	1,007	0	0
DONATION	0	0	0	0	70	0	0	0	47	50	0
FAMILY PICNIC EXPENSE	0	0	0	0	0	0	278	45	220	0	0
GEORGE HAUCK EXPE...	0	0	0	0	0	0	0	0	0	1,700	0
INVESTMENT FEE	0	0	0	0	0	75	0	0	0	0	0
OFFICE EXPENSE	0	0	0	0	0	15	103	37	0	63	0
PRINTING EXPENSE	114	0	44	0	0	0	0	140	20	0	0
TRANSFERS	0	0	0	0	0	0	0	0	84	(84)	0
	<u>\$ 114</u>	<u>\$ 0</u>	<u>\$ 44</u>	<u>\$ 0</u>	<u>\$ 123</u>	<u>\$ 121</u>	<u>\$ 663</u>	<u>\$ 486</u>	<u>\$ 1,377</u>	<u>\$ 1,791</u>	<u>\$ 0</u>
otal Expense	\$ 114	\$ 0	\$ 44	\$ 0	\$ 123	\$ 121	\$ 663	\$ 486	\$ 1,377	\$ 1,791	\$ 0
TOTAL EXPENSE	\$ 114	\$ 0	\$ 44	\$ 0	\$ 123	\$ 121	\$ 663	\$ 486	\$ 1,377	\$ 1,791	\$ 0
NET INCOME (LOSS)	<u>\$ 56</u>	<u>\$ 48</u>	<u>\$ 3</u>	<u>\$ 163</u>	<u>\$ 1,216</u>	<u>\$ 1,984</u>	<u>\$ (494)</u>	<u>\$ (235)</u>	<u>\$ (692)</u>	<u>\$ (1,729)</u>	<u>\$ 97</u>

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Gary Allen

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SACC  
Income and Expenses - Actual  
For All Accounts  
January 01 through November 30, 2004

	1/1- 1/31	2/1- 2/29	3/1- 3/31	4/1- 4/30	5/1- 5/31	6/1- 6/30	7/1- 7/31	8/1- 8/31	9/1- 9/30	10/1- 10/31	11/1- 11/30
<b>INCOME</b>											
Income											
DAINTY CONTEST INC...	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 2,000	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
DUES RECEIVED	98	48	47	163	73	0	0	18	10	62	92
FAMILY PICNIC INCOME	0	0	0	0	0	100	170	68	0	0	0
HAUCK PLAQUE DONA...	0	0	0	0	1,267	0	0	100	0	0	0
INTEREST INCOME	2	0	0	0	0	5	0	0	0	0	5
SALE OF MUGS	70	0	0	0	0	0	0	0	0	0	0
YARD SALES INCOME	0	0	0	0	0	0	0	65	675	0	0
	<u>\$ 170</u>	<u>\$ 48</u>	<u>\$ 47</u>	<u>\$ 163</u>	<u>\$ 1,340</u>	<u>\$ 2,105</u>	<u>\$ 170</u>	<u>\$ 251</u>	<u>\$ 685</u>	<u>\$ 62</u>	<u>\$ 97</u>
total Income	\$ 170	\$ 48	\$ 47	\$ 163	\$ 1,340	\$ 2,105	\$ 170	\$ 251	\$ 685	\$ 62	\$ 97
<b>TOTAL INCOME</b>	<b>\$ 170</b>	<b>\$ 48</b>	<b>\$ 47</b>	<b>\$ 163</b>	<b>\$ 1,340</b>	<b>\$ 2,105</b>	<b>\$ 170</b>	<b>\$ 251</b>	<b>\$ 685</b>	<b>\$ 62</b>	<b>\$ 97</b>
<b>EXPENSE</b>											
Expense											
BANK CHARGES	\$ 0	\$ 0	\$ 0	\$ 0	\$ 53	\$ 31	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
CORPRATION LICENSE...	0	0	0	0	0	0	0	0	0	61	0
DAINTY CONTEST EXP...	0	0	0	0	0	0	283	263	1,007	0	0
DONATION	0	0	0	0	70	0	0	0	47	50	0
FAMILY PICNIC EXPENSE	0	0	0	0	0	0	278	45	220	0	0
GEORGE HAUCK EXPE...	0	0	0	0	0	0	0	0	0	1,700	0
INVESTMENT FEE	0	0	0	0	0	75	0	0	0	0	0
OFFICE EXPENSE	0	0	0	0	0	15	103	37	0	63	0
PRINTING EXPENSE	114	0	44	0	0	0	0	140	20	0	0
TRANSFERS	0	0	0	0	0	0	0	0	84	(84)	0
	<u>\$ 114</u>	<u>\$ 0</u>	<u>\$ 44</u>	<u>\$ 0</u>	<u>\$ 123</u>	<u>\$ 121</u>	<u>\$ 663</u>	<u>\$ 486</u>	<u>\$ 1,377</u>	<u>\$ 1,791</u>	<u>\$ 0</u>
total Expense	\$ 114	\$ 0	\$ 44	\$ 0	\$ 123	\$ 121	\$ 663	\$ 486	\$ 1,377	\$ 1,791	\$ 0
<b>TOTAL EXPENSE</b>	<b>\$ 114</b>	<b>\$ 0</b>	<b>\$ 44</b>	<b>\$ 0</b>	<b>\$ 123</b>	<b>\$ 121</b>	<b>\$ 663</b>	<b>\$ 486</b>	<b>\$ 1,377</b>	<b>\$ 1,791</b>	<b>\$ 0</b>
<b>NET INCOME (LOSS)</b>	<u><u>\$ 56</u></u>	<u><u>\$ 48</u></u>	<u><u>\$ 3</u></u>	<u><u>\$ 163</u></u>	<u><u>\$ 1,216</u></u>	<u><u>\$ 1,984</u></u>	<u><u>\$ (494)</u></u>	<u><u>\$ (235)</u></u>	<u><u>\$ (692)</u></u>	<u><u>\$ (1,729)</u></u>	<u><u>\$ 97</u></u>

78158

# Commonwealth of Kentucky

OFFICE OF  
SECRETARY OF STATE

DREXELL R. DAVIS  
Secretary



FRANKFORT,  
KENTUCKY

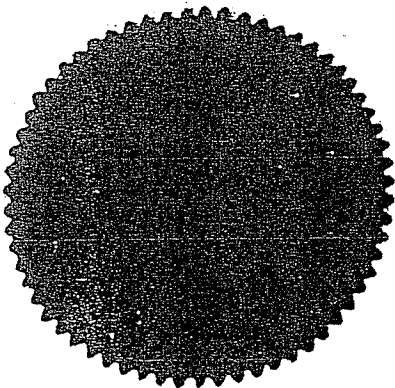
## CERTIFICATE OF INCORPORATION OF NON-STOCK, NON-PROFIT CORPORATION

I, DREXELL R. DAVIS, Secretary of State of the Commonwealth of Kentucky  
certify that there has been delivered to my office articles of incorporation of  
THE SCHWITZELBURG AREA COMMUNITY COUNCIL, INC.

The name and address of the registered agent of this corporation is  
WILLIAM KEELY

NAME 819 KESWICK  
STREET ADDRESS LOUISVILLE, KENTUCKY 40217  
CITY STATE

YOW, THEREFORE, finding that these articles of incorporation conform to law  
and that all fees therefore having been paid as prescribed by law, I, DREXELL R.  
DAVIS, Secretary of State, issue this Certificate of Incorporation.



Issued this 7th day of FEBRUARY, 19 77,  
at Frankfort, Kentucky.

*Drexell R. Davis*

SECRETARY OF STATE

SECRETARY OF STATE

ASSISTANT SECRETARY OF STATE

ORIGINAL COPY  
FILED AND RECORDED  
OFFICE OF THE SECRETARY OF STATE  
COMMONWEALTH OF KENTUCKY

SECRETARY OF STATE

RECEIVED

JAN 21 1977

ARTICLES OF INCORPORATION

FOR

*[Signature]* SCHNITZELBURG AREA COMMUNITY COUNCIL, INC. Commonwealth of Kentucky  
*[Signature]*

The undersigned, the majority of whom are citizens of the United States of America, desiring to form a non-profit corporation law of the Commonwealth of Kentucky, do hereby certify:

46536

ARTICLE I

The name of the corporation shall be The Schnitzelburg Area Community Council, Inc.

ARTICLE II

Unless sooner terminated as provided by law, the Area Community Council shall have perpetual existence from the time the certificate of incorporation has been issued by the Secretary of the State of Kentucky.

ARTICLE III

The objects and purposes of the Area Community Council shall be:

- a. To unite property owners, tenants, business people and others interested in the area.
- b. To encourage civic improvements and betterments in the area.
- c. To promote community activities and interests of an educational or civic nature.
- d. To encourage residential and business property upkeep in the area, and to eliminate vandalism and littering.
- e. To encourage better fire and police protection, traffic flow and traffic law enforcement in the area.
- f. To be concerned with youth problems of the area.
- g. To encourage reasonable and adequate zoning, and to ensure uniform enforcement of codes.
- h. To encourage a spirit of friendliness and cooperative community spirit in the area and in relations with other groups in the Schnitzelburg Area and throughout the City of Louisville.
- i. To support any other activities which advance the common good and general welfare of the community and its people unless these activities are excluded by IRC Sec. 501 (c) (4) or IRS regulation.

#### ARTICLE IV

(4.1) The said Area Community Council is organized exclusively for the promotion of social and civic welfare as described in IRC Sec. 501 (c) (4). In view of that fact, no part of the net earnings of the Council shall be distributable to its members, directors, officers, and other private persons as income; however, the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Three hereof.

(4.2) No substantial part of the activities of the Area Community Council shall be the carrying on of propaganda, or otherwise attempting to influence legislation, unless the social welfare and civic objective require legislation as per the regulations concerning IRC Sec. 501 (c) (4) or intervene in any political campaign on behalf of any candidate for public office.

(4.3) Notwithstanding any other provision of these articles, the Area Community Council shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal Income Tax under Sec. 501 (c) (4) of the Internal Revenue Code of 1954.

(4.4) Upon dissolution of the Area Community Council, the Board of directors shall, after paying or making provision for the payment of all the liabilities of the Area Community Council, dispose of all the assets of the Area Community Council exclusively for the purposes of the Area Community Council in such manner, or to such organization or organizations established and operated exclusively for social welfare or civic purposes as shall at the time qualify as exempt organization or organizations under Sec. 501 (c) (4) Internal Revenue Code of 1954 as the Board of Directors shall determine. Any such assets not so disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

#### ARTICLE V

(5.1) The registered office and place of business of the corporation shall be: William Keely, 819 Keswick, Louisville, Jefferson County, Kentucky 40217.

(5.2) The name and address of its resident agent for the service of process shall be: William Keely, President, 819 Keswick, Louisville, Kentucky 40217.



ARTICLE VI

The officers, directors, or members of the Area Community Council shall not be personally liable for payment of debts, liabilities, or obligations of the Council to any extent whatsoever.

ARTICLE VII

(7.1) The initial board of directors shall consist of thirteen members on the ~~board~~ and four officers selected from the board.

(7.2) The following individuals will serve in the capacity of ~~officers~~ <sup>directors</sup> until the selection of their successors:

President: William Keely, 819 Keswick, Louisville, Ky., 40217

Vice-President: Gregory Sarjent, 942 Mulberry, Louisville, Ky., 40217

Secretary: James Peak, 1021 Wagner, Louisville, Ky., 40217

Treasurer: William Tinker, 1245 Milton, Louisville, Ky., 40217

IN WITNESS thereof, we have hereunto subscribed our names this 26 day of June, 1977.

Notary Public for Kentucky

*M. J. Schmidt*

*William Keely*

*Wm W. Tinker*

*James Peak*

*Gregory Sarjent*

Form **872-C**

(Rev. September 1998)

Department of the Treasury  
Internal Revenue Service**Consent Fixing Period of Limitation Upon  
Assessment of Tax Under Section 4940 of the  
Internal Revenue Code**

(See instructions on reverse side.)

OMB No. 1545-0056

To be used with  
Form 1023. Submit  
in duplicate.

Under section 6501(c)(4) of the Internal Revenue Code, and as part of a request filed with Form 1023 that the organization named below be treated as a publicly supported organization under section 170(b)(1)(A)(vi) or section 509(a)(2) during an advance ruling period,

SCHNITZELBURG AREA COMMUNITY COUNCIL, INC.  
(Exact legal name of organization as shown in organizing document)

1342 HICKORY ST. LOUISVILLE KENTUCKY 40217  
(Number, street, city or town, state, and ZIP code)

and the

District Director of  
Internal Revenue, or  
Assistant  
Commissioner  
(Employee Plans and  
Exempt Organizations)

consent and agree that the period for assessing tax (imposed under section 4940 of the Code) for any of the 5 tax years in the advance ruling period will extend 8 years, 4 months, and 15 days beyond the end of the first tax year.

However, if a notice of deficiency in tax for any of these years is sent to the organization before the period expires, the time for making an assessment will be further extended by the number of days the assessment is prohibited, plus 60 days.

Ending date of first tax year 12/31/2005  
(Month, day, and year)

Name of organization (as shown in organizing document)

SCHNITZELBURG AREA COMMUNITY COUNCIL INC

Date

9/30/2005

Officer or trustee having authority to sign

Signature

William W. Tinker Jr.

Type or print name and title

WILLIAM TINKER JR  
TREASURER

For IRS use only

District Director or Assistant Commissioner (Employee Plans and Exempt Organizations)

Date

By ▶

For Paperwork Reduction Act Notice, see page 7 of the Form 1023 Instructions.

Cat. No. 16905Q

List of board members of the  
Schnitzelburg Area Community Council  
Effective Date July 22, 2005

President Gary Wayne Allen  
Vice President Ben Snyder  
Treasury Bill Tinker  
Secretary Vannah Armstrong

Susan Brunton  
Lillie Ernst  
Evelyn Gammel  
Cheryl Held  
Jean Miles  
Dorie Oswald  
Paul Senn

Father Roy Stiles, St. Elizabeth's Church

Rev. Ted Wilson, Zion's United Church of Christ.

**Application for Recognition of Exemption**  
**Under Section 501(c)(3) of the Internal Revenue Code**

OMB No. 1545-0056

Note: If exempt status is approved, this application will be open for public inspection.

Read the instructions for each Part carefully.

A User Fee must be attached to this application.

If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to you.

Complete the Procedural Checklist on page 8 of the instructions.

**Part I Identification of Applicant**

1a Full name of organization (as shown in organizing document) <i>Schwitzelburg Area Community Council</i>		2 Employer identification number (EIN) (If none, see page 3 of the Specific Instructions.) .....
1b c/o Name (if applicable) <i>Cary Wayne Allen</i>		3 Name and telephone number of person to be contacted if additional information is needed <i>502-634-9130</i>
1c Address (number and street) <i>1050 Wagner St</i>	Room/Suite .....	4 Month the annual accounting period ends <i>12/31</i>
1d City, town, or post office, state, and ZIP + 4. If you have a foreign address, see <b>Specific Instructions</b> for Part I, page 3. <i>Louisville, Ky 40217</i>		5 Date incorporated or formed <i>2/7/77</i>
1e Web site address .....		6 Check here if applying under section: a <input type="checkbox"/> 501(e) b <input type="checkbox"/> 501(f) c <input type="checkbox"/> 501(k) d <input type="checkbox"/> 501(n)
7 Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an explanation.		
8 Is the organization required to file Form 990 (or Form 990-EZ)? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach an explanation (see page 3 of the <b>Specific Instructions</b> ).		
9 Has the organization filed Federal income tax returns or exempt organization information returns? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," state the form numbers, years filed, and Internal Revenue office where filed.		

10 Check the box for the type of organization. ATTACH A CONFORMED COPY OF THE CORRESPONDING ORGANIZING DOCUMENTS TO THE APPLICATION BEFORE MAILING. (See **Specific Instructions** for Part I, Line 10, on page 3.) See also Pub. 557 for examples of organizational documents.)

- a ☐ Corporation—Attach a copy of the Articles of Incorporation (including amendments and restatements) showing approval by the appropriate state official; also include a copy of the bylaws.
- b ☐ Trust— Attach a copy of the Trust Indenture or Agreement, including all appropriate signatures and dates.
- c ☒ Association— Attach a copy of the Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of the bylaws.

If the organization is a corporation or an unincorporated association that has not yet adopted bylaws, check here ☐

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please  
Sign  
Here

*Cary Wayne Allen*  
(Signature)

*Cary Wayne Allen President*  
(Type or print name and title or authority of signer)

*8/30/2005*  
(Date)

**Part II** Activities and Operational Information (Continued)**4** Give the following information about the organization's governing body:

a Names, addresses, and titles of officers, directors, trustees, etc.

Ben Snyder, Vice President  
 William Parker Jr. Treasurer  
 Vannah Bentley, Sec.  
 Leslie Reed Hoff, Event Coordinator

b Annual compensation

c Do any of the above persons serve as members of the governing body by reason of being public officials or being appointed by public officials?

☐ Yes ☒ No

If "Yes," name those persons and explain the basis of their selection or appointment.

d Are any members of the organization's governing body "disqualified persons" with respect to the organization (other than by reason of being a member of the governing body) or do any of the members have either a business or family relationship with "disqualified persons"? (See Specific Instructions for Part II, Line 4d, on page 3.)

☐ Yes ☒ No

If "Yes," explain.

**5** Does the organization control or is it controlled by any other organization?☐ Yes ☒ No

Is the organization the outgrowth of (or successor to) another organization, or does it have a special relationship with another organization by reason of interlocking directorates or other factors?

☐ Yes ☒ No

If either of these questions is answered "Yes," explain.

**6** Does or will the organization directly or indirectly engage in any of the following transactions with any political organization or other exempt organization (other than a 501(c)(3) organization): (a) grants; (b) purchases or sales of assets; (c) rental of facilities or equipment; (d) loans or loan guarantees; (e) reimbursement arrangements; (f) performance of services, membership, or fundraising solicitations; or (g) sharing of facilities, equipment, mailing lists or other assets, or paid employees?☐ Yes ☒ No

If "Yes," explain fully and identify the other organizations involved.

**7** Is the organization financially accountable to any other organization?☐ Yes ☒ No

If "Yes," explain and identify the other organization. Include details concerning accountability or attach copies of reports if any have been submitted.

**Part III** Technical Requirements

- 1 Are you filing Form 1023 within 15 months from the end of the month in which your organization was created or formed? ☐ Yes ☒ No  
If you answer "Yes," do not answer questions on lines 2 through 6 below.

- 2 If one of the exceptions to the 15-month filing requirement shown below applies, check the appropriate box and proceed to question 7.

**Exceptions**—You are not required to file an exemption application within 15 months if the organization:

- ☐ a Is a church, interchurch organization of local units of a church, a convention or association of churches, or an integrated auxiliary of a church. See **Specific Instructions**, Line 2a, on page 4;
- ☒ b Is not a private foundation and normally has gross receipts of not more than \$5,000 in each tax year; or
- ☐ c Is a subordinate organization covered by a group exemption letter, but only if the parent or supervisory organization timely submitted a notice covering the subordinate.

- 3 If the organization does not meet any of the exceptions on line 2 above, are you filing Form 1023 within 27 months from the end of the month in which the organization was created or formed? ☐ Yes ☒ No

If "Yes," your organization qualifies under Regulation section 301.9100-2, for an automatic 12-month extension of the 15-month filing requirement. Do not answer questions 4 through 6.

If "No," answer question 4.

- 4 If you answer "No" to question 3, does the organization wish to request an extension of time to apply under the "reasonable action and good faith" and the "no prejudice to the interest of the government" requirements of Regulations section 301.9100-3? ☐ Yes ☒ No

If "Yes," give the reasons for not filing this application within the 27-month period described in question 3. See **Specific Instructions**, Part III, Line 4, before completing this item. Do not answer questions 5 and 6.

If "No," answer questions 5 and 6.

- 5 If you answer "No" to question 4, your organization's qualification as a section 501(c)(3) organization can be recognized only from the date this application is filed. Therefore, do you want us to consider the application as a request for recognition of exemption as a section 501(c)(3) organization from the date the application is received and not retroactively to the date the organization was created or formed? ☒ Yes ☐ No

- 6 If you answer "Yes" to question 5 above and wish to request recognition of section 501(c)(4) status for the period beginning with the date the organization was formed and ending with the date the Form 1023 application was received (the effective date of the organization's section 501(c)(3) status), check here ☒ and attach a completed page 1 of Form 1024 to this application.

**Part III** Technical Requirements (Continued)

- 10 If you checked box h, i, or j in question 9, has the organization completed a tax year of at least 8 months?
- ☐ Yes—Indicate whether you are requesting:
- ☐ A definitive ruling. (Answer questions 11 through 14.)
- ☐ An advance ruling. (Answer questions 11 and 14 and attach two Forms 872-C completed and signed.)
- ☐ No—You must request an advance ruling by completing and signing two Forms 872-C and attaching them to the Form 1023.

- 11 If the organization received any unusual grants during any of the tax years shown in Part IV-A, **Statement of Revenue and Expenses**, attach a list for each year showing the name of the contributor; the date and the amount of the grant; and a brief description of the nature of the grant.

No

- 12 If you are requesting a definitive ruling under section 170(b)(1)(A)(iv) or (vi), check here ☐ and:

- a Enter 2% of line 8, column (e), Total, of Part IV-A . . . . .
- b Attach a list showing the name and amount contributed by each person (other than a governmental unit or "publicly supported" organization) whose total gifts, grants, contributions, etc., were more than the amount entered on line 12a above.

- 13 If you are requesting a definitive ruling under section 509(a)(2), check here ☐ and:

- a For each of the years included on lines 1, 2, and 9 of Part IV-A, attach a list showing the name of and amount received from each "disqualified person." (For a definition of "disqualified person," see **Specific Instructions**, Part II, Line 4d, on page 3.)
- b For each of the years included on line 9 of Part IV-A, attach a list showing the name of and amount received from each payer (other than a "disqualified person") whose payments to the organization were more than \$5,000. For this purpose, "payer" includes, but is not limited to, any organization described in sections 170(b)(1)(A)(i) through (vi) and any governmental agency or bureau.

- 14 Indicate if your organization is one of the following. If so, complete the required schedule. (Submit only those schedules that apply to your organization. **Do not submit blank schedules.**)

	Yes	No	If "Yes," complete Schedule:
Is the organization a church? . . . . .		✓	A
Is the organization, or any part of it, a school? . . . . .		✓	B
Is the organization, or any part of it, a hospital or medical research organization? . . . . .		✓	C
Is the organization a section 509(a)(3) supporting organization? . . . . .		✓	D
Is the organization a private operating foundation? . . . . .		✓	E
Is the organization, or any part of it, a home for the aged or handicapped? . . . . .		✓	F
Is the organization, or any part of it, a child care organization? . . . . .		✓	G
Does the organization provide or administer any scholarship benefits, student aid, etc.? . . . .		✓	H
Has the organization taken over, or will it take over, the facilities of a "for profit" institution? . . .		✓	I

**Part IV****Financial Data (Continued)****B. Balance Sheet (at the end of the period shown)**Current tax year  
Date 1/31/2005**Assets**

1	Cash . . . . .	1	1876
2	Accounts receivable, net . . . . .	2	
3	Inventories . . . . .	3	
4	Bonds and notes receivable (attach schedule) . . . . .	4	
5	Corporate stocks (attach schedule) . . . . .	5	
6	Mortgage loans (attach schedule) . . . . .	6	
7	Other investments (attach schedule) <u>CD</u> . . . . .	7	4000
8	Depreciable and depletable assets (attach schedule) . . . . .	8	
9	Land . . . . .	9	
10	Other assets (attach schedule) . . . . .	10	
11	<b>Total assets</b> (add lines 1 through 10) . . . . .	11	5876

**Liabilities**

12	Accounts payable . . . . .	12	
13	Contributions, gifts, grants, etc., payable . . . . .	13	
14	Mortgages and notes payable (attach schedule) . . . . .	14	
15	Other liabilities (attach schedule) . . . . .	15	
16	<b>Total liabilities</b> (add lines 12 through 15) . . . . .	16	

**Fund Balances or Net Assets**

17	<b>Total fund balances or net assets</b> . . . . .	17	5876
18	<b>Total liabilities and fund balances or net assets</b> (add line 16 and line 17) . . . . .	18	5876

If there has been any substantial change in any aspect of the organization's financial activities since the end of the period shown above, check the box and attach a detailed explanation . . . . . ☐